



5015 Penn Ave South Minneapolis, Minnesota 55419 (612) 925-4818

1571 Century Point Eagan, Minnesota 55121 (651) 681-8434

www.scubacenter.com

TRIP APPLICATION

This application must be completed by each applicant for a SCUBA CENTER travel program. It should be returned with a deposit of \$300.00 Final payment of balance is due 60 days before departure unless otherwise indicated. Cancellation fees: \$50.00 if cancelled prior to 90 days before departure. \$500.00 if cancelled between 60-90 days before departure. If cancelled less than 60 days prior to departure, refunds will be determined by Scuba Center's ability to sell the vacant space, less the cancellation fee. **NOTE:** Refunds for cancellation of a liveaboard trip are base solely on the ability to resell the space forfeited. Above penalties apply.

Destination _____ Date of Departure _____

Mr./Ms. _____
Name (Please give full name)

Street Address _____

City _____ State _____ Zip Code _____

Telephone _____
Home _____ Work _____

E-mail Address _____

PASSPORT INFORMATION

Passport # _____ Name **exactly** as it appears on your passport _____

Birth Date _____ Place of Birth _____ Date and Place of Issue _____

In the event of an emergency, please list the person we may contact on your behalf:

Name _____ Area Code/Phone _____

Street Address _____

City _____ State _____ Zip Code _____

What source led you to this SCUBA CENTER Adventure?

Which SCUBA certification do you hold?

Please give a brief summary of your diving experience.

Do you have any medical history, medical condition or medical impairment which would make diving dangerous, hazardous, or expose you to exceptional risk?

Smoker Non-Smoker Any special dietary requests? _____

If you are traveling alone and wish to share a room, would you object to sharing one with a member of the opposite sex?
Yes No

We will do our best to accommodate your request, but cannot guarantee that you will share a accommodations with someone of the same sex. You can only be guaranteed a private room if you indicate your willingness to cover the expense of a single room I understand and agree to pay the cost of a single supplement.

Signature

Date

If you wish to put your airline ticket on a credit card, please list full name, number and expiration date as appears on the card:

Full Name

CC Number

Expiration Date

CC billing zipcode

CVS code

HAVE YOU COMPLETED ALL BLANKS? THE INFORMATION REQUESTED ON THIS FORM IS ESSENTIAL TO THE PROCESSING YOUR APPLICATION.

GENERAL CONDITIONS

General Release, Assumption of Risk, Waiver of Liability and Indemnity Agreement

NOTE: Trip cancellation insurance may be purchased through Scuba Center or any travel agent for a nominal premium. We urge you to purchase such insurance and read the policy carefully. Information is available at Scuba Center.

Agreement of Liability and Responsibility and Release

I hereby understand and agree to the above General Conditions and to the following terms and conditions of participating in a Scuba Center program.

1. Liability and Release: In traveling to and from any dive destination and during the trip itself, there are certain risks and dangers, including but not limited to hazards arising from the forces of nature, from living on board ship, from accident or illness without medical facilities, and from travel itself. In consideration of, and as part payment for, the right to participate in this trip, I assume all risks of harm, injury and damage to myself and my personal property arising out of my preparation for and participation in this trip. I agree to hold Scuba Center harmless from, and to indemnify it against, any and all claims, liabilities, obligations, and causes of action of whatever kind or nature for injury to me, of my death and for any and all damage to, or destruction of my personal property, resulting from any and all negligent acts or omissions of Scuba Center or its employees, agents, contractors or invitees.

2. Suppliers of Services: Scuba Center is performing a service by making known to potential participants worthwhile scuba trips. But, Scuba Center is acting independently and has no business association as partner or joint venture with any boat owner, resort, hotel, carrier or other supplier of sail or other transportation or other services. Any and all claims for inadequate or non-performance of such services may be made against the supplier of those services but shall not be made against Scuba Center.

3. All programs are subject to change as to date, itinerary and price. Substitutions on a given program are not considered cancellation by Scuba Center. No refunds can be made for cancelled diving arrangements due to adverse weather, or for substitution of facilities and/or equipment, or for minor inconvenience.

- **Applicant declares that Applicant has read and understands the contents hereof and voluntarily signs the General Release, Assumption or Risk, Waiver of Liability and Indemnity Agreement.**

Date

Signature

Send or fax application to:

SCUBA CENTER DIVE TRAVEL, 5015 Penn Avenue South, Minneapolis, MN 55419

Phone: (612) 925-4818 FAX: (612) 925-5933